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AUG 2 1 2008

## FROMMER LAWRENCE & HAUG LLP

745 Fifth Avenue New York, New York 10151 Telephone: (212) 588-0800 Facsimile: (212) 588-0500 E-mail: Firm@flhlaw.com

### **FACSIMILE COVER LETTER**

To:

Commissioner for Patents

Examiner Boccio, Vincent F.

Firm:

U.S. Patent and Trademark Office

Art Unit 2621

Facsimile:

(571) 273-8300

From:

Thomas F. Presson

Date:

August 21, 2006

Re:

FLH Ref No.: 450100-02994

Serial No:

09/778,711

Number of Pages:

16

(including cover page)

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**PATENT** 450100-02994

IN THE UNITED STATES PATENT	AND TRA	DEMARK OFFICE

RECEIVED **CENTRAL FAX CENTER** 

AUG 2 1 2006

Applicants

Tomoji Asada, ct al.

Scripl No.

09/778,711

Filed

February 7, 2001

For

COPY CONTROL METHOD AND APPARATUS FOR A

RECEIVING SYSTEM (A\$ AMENDED)

Examiner

Boccio, Vincent F.

Art Unit

2621

745 Fifth Avenue New York, NY 10151 Tel: 212-588-0800

Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Dear Sir:

⊠ Noadu ∐ The (e	erewith is an amendment in the litional fee is required. e has been calculated as shown a an application of a small entity	below.	,		in parentheses	r apply.
(1)	(2) Claims remaining after amendment	(3)	(4) Highest number previously paid for	(5) Present extra	(6) Rate	(7) Additional Fee
Total claims	18	Minus	** = 20	*0 x	\$50 (25)	= \$0
Independent claims	3	Minus	***=3	*0 x	\$200 (100)	= \$ 0
		Total ad	ditional fee for t	his amendment		\$0

- If the entry in Column 2 is less than the entry in Column 4, write "0" in Column 5.
- \*\* If the highest number of total claims previously paid for is less than 20, write "20" in this space.
- \*\*\* If the highest number of independent claims previously paid for is less than 3, write "3" in this space.

g
This application contains a multiple dependent claim. The required fee of \$360(180) has been previously paid $\square$ , or is paid herewith $\square$ .
This response is being filed within the month following the expiration of the term originally set therefor. This is a petition to request a month extension of time. A check covering the cost of the petition is enclosed.
A check in the amount of \$ is attached, which covers the cost of _ additional claims petition for extension of time.
Charge \$ to Deposit Account No. 50-0320.

Please charge any additional fees incurred by reason of this response or credit any overpayment to Deposit Account

#### CERTIFICATE OF FACSIMILE

I hereby certify that this correspondence is being transmitted via facsimile to (571) 273-8300 on August 21, 2006.

No. 50-0320.

Barnet Shindlman (Name of person signing transmittal)

August 21, 2006

Date of Signature

Respectfully submitted,

FROMMER LAWRENCE & HAUG LLP

Attorneys for Applicants

By: Thomas F. Presson

Reg. No. 41,442 Tel: 212-588-0800 U.S. Patent Application No. 09/778,711 Reply to Final Office Action dated June 21, 2006 PATENT 450100-02994

# IN THE UNITED STATES PATENT AND TRADEMARK OFFICE RECEIVED

Applicants

Tomoji Asada, et al.

CENTRAL FAX CENTER

Serial No.

09/778,711

AUG 2 1 2006

For

COPY CONTROL METHOD AND APPARATUS FOR A

RECEIVING SYSTEM (AS AMENDED)

Filed

February 7, 2001

Examiner

Boccio, Vincent F.

Art Unit

2621

Confirmation No.

4182

745 Fifth Avenue New York, NY 10151 Tel. (212) 588-0800

#### CERTIFICATE OF FACSIMILE

I hereby certify that this correspondence is being transmitted via facsimile to (571) 273-8300 on August 21, 2006.

Bamet Shindlman
(Name of person signing transmittal)

Signature August 21, 2006

Date of Signature

#### RESPONSE UNDER 37 C.F.R. § 1.116

Commissioner for Patents P.O. Box 1450

Alexandria, VA 22313-1450

Dear Sir:

In response to the Final Office Action mailed on June 21, 2006, having a threemonth statutory period for response set to expire on September 21, 2006, please amend the above-captioned application as follows. U.S. Patent Application No. 09/778,711
Reply to Final Office Action dated June 21, 2006

PATENT 450100-02994

Amendments to the Claims are reflected in the listing of claims, which begins on page 3 of this paper.

Remarks/Arguments begin on page 10 of this paper.

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